PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

IMECILA DOIAPE

CLAIMS AS FILED - PART I									SMALI	. ENTITY		OTHE	R THAN	
500			(Column 1)			(Column 2)			TYPE		OR		ENTITY	
FOR			NUMB	ER FILED	NU	MBER	EXTRA		RATE	FEE	7	RATE	FEE	
BASIC FEE				The state of the state of	etter i gra Maria (1986) Maria (1986)		tan da	2		380.00	OR	22/2 - 10 72	760.00	
TOTAL CLAIMS				7 minus	20= *				X\$ 9=		OR		/	
INDEPENDENT CLAIMS				minus	3 = *			1	X39=	 	1		 	
MULTIPLE DEPENDENT CLAIM PRESENT							1	709=	 	OR	X78=	 		
* If the difference in column 1 is less than zero, enter "0" in column 2							ן נ	+130=	<u> </u>	OR	<u> </u>			
CLAIMS AS AMENDED - PART II									TOTAL		OR		441	
(Column 1) (Column 2) (Column 3)									OTHER THAN SMALL ENTITY OR SMALL ENTITY					
4	Same de mais de	CL	AIMS -	1.31. Sec. 2. 21.			I John Till Co	ìr			7			
IENT /		AF	AINING TER IDMENT		NUME PREVICE PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	1 -	?	Minus	** 5	0	=		X\$ 9=		OR	X\$18=		
AM	Independent FIRST PRESE	* /	N OF M	Minus	***	<u> </u>	=		X39=		OR	X78=		
			11 01 111	OLTIFIE DE	PENDENT	CLAIM		ا ا	+130=		OR	+260=		
									TOTAL		OR	TOTAL		
		(Cole	ımn 1)		(0 -1	-		A	DDIT. FEE		1011	ADDIT. FEE		
***			AIMS	· · · · · · · · · · · · · · · · · · ·	(Colum		(Column 3)							
MENDMENT B		REM/ AF	AINING TER DMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 2	/	Minus	** 2	0	=		X\$ 9=		OR	X\$18=		
AM	Independent FIRST PRESE	* 1	N OF M	Minus	*** 5	l l	=		X39=		OR	X78=		
	THOTTRESE	INIAIIO	N OF MI	DETIPLE DEF	PENDENI	CLAIM			+130=		OR	+260=		
									TOTAL		OR .	TOTAL		
(Column 1) (Column 2) (Column 3)									ODIT. FEE		,	ADDIT. FEE		
			IMS	Secretary and comment	HIGHE		(Column 3)							
MENDMEN! C		REMA	INING TER	. 170	NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2 2	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	<u> </u>	
3 L	Independent	*		Minus	***		=	┢	X39=		ŀ			
1	FIRST PRESE	NTATIO	OF MU	LTIPLE DEP	ENDENT	CLAIM		\perp	×39=		OR	X78=		
• If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR	+260=		
***	i the "Highest Nun f the "Highest Nun The "Highest Numi	nber Prev nber Prev	iously Pai iously Pai	d For" IN THIS id For" IN THIS	SPACE IS I	ess than	20, enter "20."		TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		